SCHED	JLE E)	PAGE 1 OF 15 FOR SE OF FORM 24/48
	F COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FKEE	DOMWORKS FOR AMERICA	C C00499020
Check If	24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full N	ame (Last, First, Middle Initial) of Payee	9
Add	coprint.com	M M M / D D / Y Y Y Y Y
Mailin	g Address 8412 Sabal Industrial Blvd.	10 11 2012
City	State Zip Code	ount
Tamp	a FL 33619	15670.00 saction ID : SE.85215
Purpo IE-Ob	se of Expenditure Category/ Ond	ught: House State:
	Туре	Senate District: 00 President
	of Federal Candidate Supported or Opposed by Expenditure: ACK OBAMA Check Or	
	Calendar Year-To-Date Per Election for Office Sought Disburser 2012	nent For: Primary General Other (specify)
Full N	ame (Last, First, Middle Initial) of Payee Dat	de
Adc	oprint.com	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailin	g Address 8412 Sabal Industrial Blvd.	10 11 2012
		ount
City Tamp	State Zip Code FL 33619	5885.00
Purpo	se of Expenditure Cotocon/ Office So	ught: House State: FL
IE-Ha	sner-Yard Signs Type 004	Senate District: 22
	of Federal Candidate Supported or Opposed by Expenditure: Check O	President Description: President Oppose
ADAI	VITAGNEN	
	Calendar Year-To-Date Per Election for Office Sought Disburser 2012	nent For: ☐ Primary ☐ General Other (specify) ▶
(a) SU	BTOTAL of Itemized Independent Expenditures	21555.00
(b) SU	BTOTAL of Unitemized Independent Expenditures	
(c) TO	TAL Independent Expenditures	
(0) 10		7 7 7
with, o	penalty of perjury I certify that the independent expenditures reported herein were not made in at the request or suggestion of, any candidate or authorized committee or agent of either, or committee) any political party committee or its agent.	
	Ryan Hecker [Electronically Filed] Date 10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Sign	[Electronically Filed] Date 10	13 2012

SCHEDULE E)	PAGE 2 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼
	C C00499020
Check If 24-hour report	on Mam / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee	Date
Connection Strategy	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 12841 Braemar Village Plz., #51	09 30 2012
City.	Amount
City State Zip Code Bristow VA 20136	2.12
	e Sought: House State: PA Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS Chec	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disb 2012	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Constituent Services Inc.	10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8536 Bellagio Dr.	
City State Zip Code	Amount
Naples FL 34114	25000.00
Purpose of Expenditure IE-Hasner-Voter ID Calls Category/ Type 004	Transaction ID : SE.85216 Se Sought: House State: FL Senate District: 22
Name of Federal Candidate Supported or Opposed by Expenditure:	President
ADAM HASNER Chec	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disb 2012	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	25002.12
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Ryan Hecker [Electronically Filed] Date	0 13 2012
Signature	

SCHE	DULE E)					3 OF 15 OF FORM 24/48
	OF COMMITTE (In Full)				FEC IDENTIFICA	TION NUMBER ▼
FKE	EDOMWORKS FOR AMERICA				C C0049902	0
Check	If 24-hour report X 48-hour report	X New	report Amends repo		/ D D	/ Y = Y = Y = Y
Full	Name (Last, First, Middle Initial) of Payee			Data		
C	onstituent Services Inc.			Date	10 / D D D 11	/ Y Y Y Y Y 2012
Mai	ling Address 8536 Bellagio Dr.			Amou		2012
City	,	State	Zip Code			
Na		FL	34114	Transa	ection ID : SE.8522	25000.00 20
	pose of Expenditure Plummer-Voter ID Calls		Category/ Type 004	Office Soug	ht: House Senate	State: IL District: 12
Nar	ne of Federal Candidate Supported or Opposed	by Expendi	iture:	_	Presider	
	SON PLUMMER			Check One:	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought	<i>f</i> .	30498.34	Disburseme 2012 O	nt For: Primal Primal Primal Primal	g General
	Name (Last, First, Middle Initial) of Payee			Date		
	onstituent Services Inc.				M M / D D D 11	/ Y Y Y Y Y Y 2012
Ma	ling Address 8536 Bellagio Dr.					
				Amou	ınt	
City Na		State FL	Zip Code 34114			25000.00
Pur	pose of Expenditure		Category/	Office Soug	action ID : SE.852 ht: House	State: PA
	Rothfus-Voter ID Calls		Type 004	_	Senate Presider	District: 12
	ne of Federal Candidate Supported or Opposed I	by Expendi	iture:	Check One:		
	IIII KOTIIFOS					
	Calendar Year-To-Date Per Election for Office Sought	В	124005.47	Disburseme 2012 O	ther (specify)	g General
(a) (CURTOTAL of Itomized Independent Expenditure	<u> </u>				50000.00
(a) 3	SUBTOTAL of Itemized Independent Expenditures	S		. •	7	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
	er penalty of perjury I certify that the independer or at the request or suggestion of, any candidate	e or author				
	committee) any political party committee or its a	igent.				
			tronically Filed] Date	M M /		Y Y Y Y 2012

SCHEDULE E)	PAGE 4 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
	C 000499020
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	Pate
Constituent Services Inc.	M M / D D / Y Y Y Y
Mailing Addross	10 11 2012
Mailing Address 8536 Bellagio Dr.	mount
City State Zip Code	inount
Naples FL 34114	25000.00
Transport Event diture	ansaction ID : SE.85240
Purpose of Expenditure IE-Ribble-Voter ID Calls Category/ Type 004	Senate
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBI E Check	
REID RIBBLE Check	One. Support Oppose
Calendal real-10-Date Fel Flechon	ement For: Primary General
for Office Sought 25000.00 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Pate
Freedomworks	
	10 11 2012
Mailing Address 400 N CAPITOL STREET NW SUITE 765	
	mount
City State Zip Code Washington DC 20001	600.00
Tr	ansaction ID : SE.85236
Purpose of Expenditure Category/	Sonoto —
Type 001	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure:	
TOM SMITH Check	One: Support Oppose
	ement For: Primary 🔀 General
for Office Sought 472940.31 2012	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	25600.00
(a) SOBTOTAL OF REINIZED INDEPENDENT EXPENDITURES	25000.00
(h) CURTOTAL of Uniterpized Independent Eupenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(a) TOTAL Independent Fusion literature	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, c party committee) any political party committee or its agent.	
Ryan Hecker [Electronically Filed] Date 10	13 2012
Signature	

SCHEDULE E)	PAGE 5 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ C C00499020
Check If 24-hour report X 48-hour report New report Amends report file	M = M / D = D / Y = Y = Y
· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) of Payee General Advertising Products	Date 10 11 2012
Mailing Address 95 Glendale-Milford Rd.	Amount
City State Zip Code	1722.50
Cincinnati OH 45214	Transaction ID : SE.85222
Purpose of Expenditure IE-Mandel-TShirts Category/ Type 004	House State: OH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1172625.16 Dis	bursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Giant Food	Date
Mailing Address	10 09 2012
	Amount
City State Zip Code PA	55.75 Transaction ID : SE.85229
Purpose of Expenditure IE-Smith-Food/Beverage Category/ Type 001	House State: PA Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Cho	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Dis 2012	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1778.25
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
	10 13 2012
Signature	

(SCHEDULE E)	PAGE 6 OF 15 FOR SE OF FORM 24/48			
NAME OF COMMITTE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼			
FREEDOMWORKS FOR AMERICA	C C00499020			
Check If 24-hour report	filed on M M / D D / Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee	Date			
Giant Food	M M / D D / Y Y Y Y			
Mailing Address	10 09 2012			
City State Zip Code	Amount			
PA State Zip Gode	2.49			
	Transaction ID : SE.85230 Office Sought: House State: PA			
IE-Smith-Food/Beverage 004	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:	President			
TOM SMITH	Check One: Support Oppose			
Lalendar real-10-Date Per Flection	Disbursement For: Primary General			
for Office Sought 396467.55	Other (specify)			
Full Name (Last, First, Middle Initial) of Payee	Date			
Giant Food	M M / D D / Y Y Y Y			
Mailing Address	10 11 2012			
	Amount			
City State Zip Code PA	2.49			
	Transaction ID : SE.85231 Office Sought: House State: PA			
Purpose of Expenditure IE-Smith-Food/Bevrage Category/ Type 001	Senate District: PA			
Name of Federal Candidate Supported or Opposed by Expenditure:	President			
TOM SMITH	Check One: Support Oppose			
	Disbursement For: Primary General			
for Office Sought	Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	4.98			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(b) GGB 161712 of Gillionial Control in Cont				
(c) TOTAL Independent Expenditures				
	7 7			
Under penalty of perjury I certify that the independent expenditures reported herein were nowith, or at the request or suggestion of, any candidate or authorized committee or agent of experty committee) any political party committee or its agent.				
Ryan Hecker	M = M / D = D / Y = Y = Y			
[Electronically Filed] Date Signature	10 13 2012			
*				

SCHEDULE E)	PAGE 7 OF 15 FOR SE OF FORM 24/48			
	DENTIFICATION NUMBER ▼			
FREEDOMWORKS FOR AMERICA	C00499020			
Check If 24-hour report	/ D = D / Y = Y = Y			
Full Name (Last, First, Middle Initial) of Payee				
Giovanni's Pizza	/ D D / Y Y Y Y			
Mailing Address 2190 York Rd., Ste. 2	09 2012			
City State Zip Code Jamison PA 19829	44.40 n ID : SE.85233			
Purpose of Expenditure Category/ Type O01 Office Sought:	House State: PA			
	President District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Check One:	Support Oppose			
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo	or: Primary General			
Full Name (Last, First, Middle Initial) of Payee Date				
Giovanni's Pizza	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2190 York Rd., Ste. 2	09 2012			
Amount				
City State Zip Code Jamison PA 19829	56.26			
Transaction Office Sought	n ID : SE.85234 House State: PA			
IE-Smith-Food/Beverage Category/ Type Onice Sought.	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	President Support Oppose			
TOM SMITH Check One:	Support Oppose			
Calendar Year-To-Date Per Election for Office Sought 396523.81 Disbursement Fo	or: Primary General (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	100.66			
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	7 7 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coope with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the report committee) any political party committee or its agent.				
Ryan Hecker [Electronically Filed] Date 10 13				
Signature				

SCHEDULE E)	PAGE 8 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If 24-hour report 48-hour report New report Amends report filed on	M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee Date	
Giovanni's Pizza	M M / D D / Y Y Y Y
Mailing Address 2190 York Rd., Ste. 2	10 11 2012
Amou	ınt
City State Zip Code	57.37
	action ID : SE.85235
Purpose of Expenditure Category/ Office Soug	I
Type 001	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Check One	
Calendar Year-To-Date Per Election Use Office Occupits Disburseme 2012	
	ther (specify)
Full Name (Last, First, Middle Initial) of Payee Master Print Date	
	10 11 2012
Mailing Address 3325 Harrison Ave.	
Amou	unt
City State Zip Code Cincinnati OH 45211	44988.29
Office Soul	action ID : SE.85221 pht: House State: OH
Purpose of Expenditure IE-Mandel-Yard Signs Category/ Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ——
JOSH MANDEL Check One	: Support Oppose
Calendar Year-To-Date Per Election Disburseme	ent For: Primary X General
1170902 66 2012	other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	45045.66
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 1 7 1 7
(c) TOTAL Independent Expenditures	
	7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ryan Hecker	
[Electronically Filed] Date 10	13 2012
Signature	

SCHEDULE E)	PAGE 9 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
	M = M / D = D / Y = Y = Y
Check If 24-hour report 48-hour report New report Amends report filed on	
Full Name (Last, First, Middle Initial) of Payee	ate
Mungo LLC	M M / D D / Y Y Y Y
Mailing Address 625 Clay Street E	09 28 2012
	mount
City State Zip Code	5000.00
Monmouth OR 97361	nsaction ID : SE.85218
Purpose of Expenditure Category/ Office State Category Output Output Category Output Output Category Output Ou	•
Type U04	Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JASON PLUMMER Check C	One: Support Oppose
Valendal real-10-Date Fet Flection	ement For: Primary X General
for Office Sought 5049.50 2012	Other (specify)
	ate
Mungo LLC	M M / D D / Y Y Y Y
Mailing Address 625 Clay Street E	10 05 2012
	mount
City State Zip Code	4631.00
	insaction ID : SE.85239
Purpose of Expenditure IE-Ribble-Signage Category/ Type 004	
туре	Senate District: 08 President
Name of Federal Candidate Supported or Opposed by Expenditure: Check C	
REID RIBBLE	oupport pppose
4631 00 2012	ement For: Primary General
for Office Sought	Other (specify)
•	
(a) SUBTOTAL of Itemized Independent Expenditures	9631.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ryan Hecker [Electronically Filed] Date 10	13 2012
Signature	

SCHEDULE E)	PAGE 10 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Date	
Mungo LLC	M M / D D / Y Y Y Y
Mailing Address 625 Clay Street E	10 11 2012
Amou	unt
City State Zip Code Monmouth OR 97361	20995.00
Transa of Europediture	action ID : SE.85213
Purpose of Expenditure Category/ Type Office Sough	Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
BARACK OBAMA Check One	: Support X Oppose
Calendar Year-To-Date Per Election Disburseme	ent For: Primary General
205074 22 2042	Other (specify)
Full Name (Last, First, Middle Initial) of Payee Date	
Odd Lamps Productions LLC	M M / D D / Y Y Y Y
Mailing Address 12076 92nd Ave., N	10 12 2012
Amou	unt
City State Zip Code Maple Grove MN 55369	6250.00
Trans	action ID : SE.85214
Purpose of Expenditure IE-Obama-Video Production Category/ Type 004	Senate Service
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
BARACK OBAMA Check One	: Support X Oppose
Calendar Year-To-Date Per Election Disburseme	ent For: Primary X General
407791 22 2012	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	27245.00
	7 1 7 1 7 1 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ryan Hecker	
[Electronically Filed] Date 10	13 2012
Signature	

FEE DOMWORKS FOR AMERICA Check If	(SCHEDULE E)	PAGE 11 OF 15 FOR SE OF FORM 24/48			
Check If 24-hour report 48-hour report New report Amends report filled on		FEC IDENTIFICATION NUMBER ▼			
Check If 24-hour report Amends report filed on	FREEDOIVIVORNS FOR AWIERICA	C C00499020			
Mailing Address 945 Washington Ave. Amount	Check If 24-hour report X 48-hour report New report Amends report	rt filed on			
Mailing Address 945 Washington Ave. Amount City		Date			
Mailing Address 945 Washington Ave. City Croyden PA 19021 Transaction D: \$E.85226 Purpose of Expenditure IE-Smith-Yard Signs Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Page Printing Mailing Address 945 Washington Ave. City Croyden PA 19021 Transaction D: \$E.85226 President President Check One: Support Oppose Support Oppose Page Printing Mailing Address 945 Washington Ave. Amount City Croyden PA 19021 Transaction D: \$E.8527 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Category/ Type 004 Transaction D: \$E.8527 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Senate District: 00 President 10 11 12 2012 Transaction D: \$E.8527 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Senate District: 00 President For Office Sought Transaction D: \$E.85227 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Senate District: 00 President For Office Sought Transaction D: \$E.85227 Office Sought: Flows Fransaction D: \$E.85227 Purpose of Expenditure For Signs/Palm Cards Transaction D: \$E.85227 Transaction D: \$E.85227 District: 00 President Transaction D: \$E.85227 Purpose of Expenditure For Office Sought Transaction D: \$E.85227 Transaction D: \$E.85227 Transaction D: \$E.85227 District: 00 Primary Senate District: 00 President For Office Sought Transaction D: \$E.85227 Transaction D: \$E.85227 Transaction D: \$E.85227 District: 00 Primary Senate District: 00 President For Office Sought Transaction D: \$E.85227 Transaction D: \$E.85227 District: 00 Primary Senate District: 00 Primary Senate District: 00 President For Office Sought Transaction D: \$E.85227 Transaction D: \$E.85227 Transaction D: \$E.85227 District: 00 Primary Senate Distric	Page Printing				
City Croyden PA 19021 Purpose of Expenditure ItE-Smith-Yard Signs Category/ Type 004 Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Mailing Address 945 Washington Ave. City Croyden PA 19021 Purpose of Expenditure ItE-Smith-Yard Signs/Palm Cards City Croyden PA 19021 Prisident Code Prisident College Support Oppose Disbursement For: Primary General 2012 Other (specify) Amount City State Zip Code PA 19021 Purpose of Expenditure ItE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Category/ Type 004 Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought for Office	Mailing Address 945 Washington Ave.				
Croyden PA 19021 Transaction ID: SE.85226 Purpose of Expenditure IE-Smith-Yard Signs Category/ Type 004 Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Amount City State Zip Code PA 19021 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Category/ Type 004 Tother (specify) Transaction ID: SE.85227 Amount City State Zip Code PA 19021 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Check One: Support Oppose	City State Zin Code	Amount			
Purpose of Expenditure IE-Smith-Yard Signs Category/ Type Oo4 Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Page Printing Mailing Address 945 Washington Ave. City Croyden Pa State Zip Code PA 19021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Amount City Senate District: OO President Transaction ID: SE.85227 Transaction ID: SE.85227 Category/ Type Oo4 Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought AT2340.31 Disbursement For: Primary General Other (specify) Other (specify) Other (specify) Other (specify) Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert					
Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Page Printing Mailing Address 945 Washington Ave. City State Zip Code PA 19021 Croyden PA 19021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Arount City State Zip Code PA 19021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Arount Check One: Support Oppose Disbursement For: Primary President Check One: Support Oppose Other (specify) General Disbursement For: Primary Oppose Other (specify) Calendar Year-To-Date Per Election for Office Sought Arount Check One: Support Oppose Other (specify) Compose Other (specify) Compose Transaction ID: SE.85227 Transaction ID: SE.85227 Transaction ID: SE.85227 Purpose of Expenditure Senate District: 00 President Check One: Support Oppose Other (specify) Compose Other (specify) Other (specify) Compose Other (specify) Other (specify) Other (specify) Other (specify)	IF-Smith-Vard Signs	Office Sought: House State: PA			
Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Page Printing Mailing Address 945 Washington Ave. City State Zip Code PA 19021 Croyden PA 19021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Arount City State Zip Code Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Under Support Oppose Other (specify) State: PA Senate District: 00 President Check One: Support Oppose Oppose Other (specify) State: PA Senate District: 00 President Check One: Support Oppose Oppose Other (specify) State: PA Support Oppose Other (specify) Category Transaction ID: SE.85227 Transaction ID: SE.85227 Other (specify) State: PA Senate District: 00 President Other (specify) State: PA Support Oppose Other (specify) State: PA Support Oppose Other (specify) Transaction ID: SE.85227 Transaction ID: SE.85227 Transaction ID: SE.85227 Transaction ID: SE.85227 Other (specify) Site of the support of the	Name of Federal Candidate Supported or Opposed by Expenditure:				
for Office Sought Full Name (Last, First, Middle Initial) of Payee Page Printing Mailing Address 945 Washington Ave. City State Zip Code PA 19021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures. (b) SUBTOTAL of Unitemized Independent Expenditures. Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert		Check One: Support Oppose			
Page Printing Mailing Address 945 Washington Ave. Amount City State Zip Code PA 19021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought A72340.31 Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert	396284.91	2012			
Mailing Address 945 Washington Ave. City State Zip Code 19021 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures		Date			
Mailing Address 945 Washington Ave. City State Zip Code 18021 Transaction ID: SE.85227 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures	Page Printing				
City Croyden PA 19021 Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Unitemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert	Mailing Address 945 Washington Ave.				
Croyden PA 19021 Transaction ID: SE.85227 Purpose of Expenditure E-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert	City State Zin Code				
Purpose of Expenditure IE-Smith-Yard Signs/Palm Cards Name of Federal Candidate Supported or Opposed by Expenditure: TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert		-ggg-			
TOM SMITH Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures	IE Smith Vord Signs/Bolm Cords	Office Sought: House State: PA			
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate Supported or Opposed by Expenditure:				
(a) SUBTOTAL of Itemized Independent Expenditures	TOM SMITH	Check One: Support Oppose			
(b) SUBTOTAL of Unitemized Independent Expenditures	472340 31	2012			
(b) SUBTOTAL of Unitemized Independent Expenditures	(a) CURTOTAL of Itamizad Indonendant Funenditures	22704 70			
(c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert	(a) SUBTUTAL of itemized independent Expenditures	33/21.78			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert	(b) SUBTOTAL of Unitemized Independent Expenditures				
	(c) TOTAL Independent Expenditures				
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	with, or at the request or suggestion of, any candidate or authorized committee or agent of				
Ryan Hecker [Electropically Filed]	[El-4				
[Electronically Filed] Date 10 13 2012 Signature		10 13 2012			

SCHEDULE E)	PAGE 12 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If 24-hour report X 48-hour report New report Amends report filed on	M M
Full Name (Last, First, Middle Initial) of Payee	
Page Printing	M M / D D / Y Y Y Y
Mailing Address 945 Washington Ave.	10 11 2012
Amo	ount
City State Zip Code Croyden PA 19021	44223.20
Trans	ght: House State: PA
Purpose of Expenditure IE-Casey-Yard Signs Category/ Type 004	Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
ROBERT P JR CASEY Check One	e: Support Dppose
Calendar Year-To-Date Per Election Disbursem	ent For: Primary General
for Office Sought 440747.01 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee Date)
Political Gravity	10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 101 Colorado St., #3201	10 03 2012
Amo	punt
City State Zip Code Austin TX 78701	448.84
Trans	saction ID : SE.85219 ght: V House State: IL
Purpose of Expenditure IE-Plummer-Walking Maps Category/ Type 004	Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
JASON PLUMMER Check One	e: X Support Oppose
Calendar Year-To-Date Per Election Disbursem	ent For: Primary General
for Office Sought 5498.34 2012	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	44672.04
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(b) 19142 independent Experiorities	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (i party committee) any political party committee or its agent.	
Ryan Hecker	/ D D / Y Y Y Y
[Electronically Filed] Date 10	13 2012
Oignaturo ————	

(SCHEDULE E)	PAGE 13 OF 15 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If 24-hour report X 48-hour report New report Amends report f	filed on M M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee	Date
Political Gravity	M M / D D / Y Y Y Y
Mailing Address 101 Colorado St., #3201	10 05 2012
	Amount
City State Zip Code Austin TX 78701	448.84
Purpose of Expenditure Category/	Transaction D : SE.85223 Office Sought: House State: PA
IE-Rothfus-Walking Maps Category/ Type O04	Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
KEITH ROTHFUS	Check One: Support Oppose
Galeridal Teal-To-Date Fel Election 99005 47 20	Disbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee Political Gravity	Date
<u> </u>	10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 101 Colorado St., #3201	A
City State Zip Code	Amount
Austin TX 78701	448.84
	Transaction ID : SE.85238 Office Sought: House State: WI
IE-Ribble-Walking Maps Type 004	Senate District: 08
Name of Federal Candidate Supported or Opposed by Expenditure:	President
REID RIBBLE	Check One: Support Oppose
Calefidal Teal-To-Date Fel Liection 85008 84 20	Disbursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	897.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(-,	7 7 7
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Ryan Hecker	M - M / D - D / Y - Y - Y
[Electronically Filed] Date Signature	10 13 2012

(SCHEDULE E)	PAGE 14 OF 15 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
FREEDOMWORKS FOR AMERICA	C C00499020	
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Ana Puig	Date	
Mailing Address 400 N. Capitol St., NW	10 11 2012	
Ste. 765	Amount	
City State Zip Code	514.10	
Washington DC 20001	Transaction ID : SE.85237	
Purpose of Expenditure IE-Smith-Palm Cards Category/ Type 004	Office Sought: House State: PA Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOM SMITH	Check One: Support Oppose	
Calcillat real-10-Date Fet Election	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Texas GOP Store	Date	
Mailing Address to the Political	10 07 2012	
Mailing Address 404 I-45 South	Amount	
City State Zip Code	205.00	
Huntsville TX 77340	885.00 Transaction ID : SE.85212	
Purpose of Expenditure Category/	Office Sought: House State:	
IE-Obama-Palm Cards Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
BARACK OBAMA	Check One: Support Oppose	
	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	1399.10	
(b) SUBTOTAL of Unitemized Independent Expenditures	•	
(c) TOTAL Independent Expenditures		
	, , , , , , , , , , , , , , , , , , , ,	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ryan Hecker [Electronically Filed] Data	M = M / D = D / Y = Y = Y = Y	
Signature [Electronically Filea] Date	10 13 2012	

SCHEDULE E)	PAGE 15 OF 15 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
FREEDOMWORKS FOR AMERICA	C C00499020	
Check If 24-hour report X 48-hour report New report Amends report filed on	/ = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Thirsty's Beer	MIM / DID / Y Y Y Y	
Mailing Address 111 Easton Rd.	10 09 2012	
City State Zip Code	iiit	
Warrington PA 18976	80.00 action ID : SE.85232	
Purpose of Expenditure IE-Smith-Food/Beverage Category/ Type Office Soug	ht: House State: PA	
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00	
TOM SMITH Check One:	Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2012 Office Sought Disbursement 2012	nt For: Primary General ther (specify)	
Full Name (Last, First, Middle Initial) of Payee Date		
	M M	
Mailing Address		
Amou	ınt	
City State Zip Code		
Purpose of Expenditure Category/ Type Office Soug	ht: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Check One:	: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disburseme	ent For: Primary General wither (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	80.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) SOBTOTAL OF OFficerinized independent Experiorities	7 7 7	
(c) TOTAL Independent Expenditures	286733.27	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ryan Hecker [Electronically Filed] Date 10	13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		